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1625

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/076,131	
	Filing Date	February 13, 2002	
	First Named Inventor	Babu J. MAVUNKEL	
	Art Unit	1625	
	Examiner Name	C. Chang	
Total Number of Pages in This Submission	48	Attorney Docket Number	219002028310

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form (1 page + duplicate) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (24 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 page) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Exhibits A-E (20 pages) Return Receipt Postcard
<b>Remarks</b>  Customer No. 25225		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

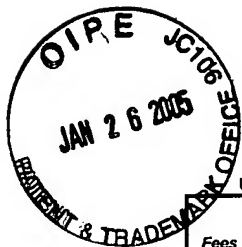
Firm Name	MORRISON & FOERSTER LLP		
Signature			
Printed name	Michael G. Smith		
Date	January 26, 2005	Reg. No.	44,422

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 441 682 993 US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: January 26, 2005

Signature:

(Norman Green)



PTO/SB/17 (12-04)

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<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b>		
		Application Number	10/076,131	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	February 13, 2002	
		First Named Inventor	Babu J. MAVUNKEL	
		Examiner Name	C. Chang	
TOTAL AMOUNT OF PAYMENT		Art Unit	1625	
(\$)		1,020.00	Attorney Docket No.	219002028310

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 03-1952
Deposit Account Name: Morrison & Foerster LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
Application Type	Filing Fees	Small Entity	Fee (\$)	Fee (\$)	Search Fees	Small Entity	Fee (\$)
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Small Entity	Fee (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
Fee Description							Small Entity
							Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent							50
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent							200
Multiple dependent claims							360
Total Claims							Fee Paid (\$)
- 20 =							
Extra Claims							Fee Paid (\$)
- 3 =							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)		
- 100 =		/50	(round up to a whole number) x				
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							
Other: 1253 Extension for response within third month							1,020.00

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	44,422
Name (Print/Type)	Michael G. Smith	Telephone	(858) 720-5100
		Date	January 26, 2005